

County: Taylor
MEMORIAL NURSING HOME LTC UNIT

Facility ID: 5500

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135 SOUTH GIBSON STREET
MEDFORD 54451 Phone: (715) 748-8100

Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? Yes
Number of Beds Set Up and Staffed (12/31/00): 96
Total Licensed Bed Capacity (12/31/00): 104
Number of Residents on 12/31/00: 87

Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified?
Average Daily Census:

Nonprofit Church-Related
Skilled
Yes
Yes
91

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	35.6
Supp. Home Care-Personal Care	No					1 - 4 Years	46.0
Supp. Home Care-Household Services	No	Developmental Disabilities	2.3	Under 65	4.6	More Than 4 Years	18.4
Day Services	No	Mental Illness (Org./Psy)	36.8	65 - 74	11.5		
Respite Care	Yes	Mental Illness (Other)	2.3	75 - 84	24.1		100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	47.1	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	12.6	Full-Time Equivalent	
Congregate Meals	No	Cancer	2.3			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	6.9		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	21.8	65 & Over	95.4		
Transportation	No	Cerebrovascular	13.8			RNs	16.6
Referral Service	No	Diabetes	5.7	Sex	%	LPNs	6.0
Other Services	No	Respiratory	3.4			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	4.6	Male	31.0	Aides & Orderlies	
Mentally Ill	No			Female	69.0		44.3
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay		Managed Care			Total	Percent Of All Residents	
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%			Per Diem Rate
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	3	100.0	\$117.00	59	89.4	\$100.44	0	0.0	\$0.00	18	100.0	\$117.00	0	0.0	\$0.00	80	92.0%
Intermediate	---	---	---	3	4.5	\$83.15	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	3	3.4%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	4	6.1	\$117.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	4	4.6%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	3	100.0		66	100.0		0	0.0		18	100.0		0	0.0		87	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	4.8	Bathing	6.9	59.8	33.3	87
Private Home/With Home Health	13.3	Dressing	23.0	55.2	21.8	87
Other Nursing Homes	4.8	Transferring	35.6	49.4	14.9	87
Acute Care Hospitals	71.4	Toilet Use	29.9	44.8	25.3	87
Psych. Hosp. -MR/DD Facilities	0.0	Eating	77.0	10.3	12.6	87
Rehabilitation Hospitals	0.0	*****				
Other Locations	5.7	Continence	%	Special Treatments		%
Total Number of Admissions	105	Indwelling Or External Catheter	5.7	Receiving Respiratory Care		6.9
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	43.7	Receiving Tracheostomy Care		0.0
Private Home/No Home Health	16.7	Occ/Freq. Incontinent of Bowel	25.3	Receiving Suctioning		0.0
Private Home/With Home Health	6.1	Mobility		Receiving Ostomy Care		3.4
Other Nursing Homes	4.4	Physically Restrained	8.0	Receiving Tube Feeding		0.0
Acute Care Hospitals	28.1	Skin Care		Receiving Mechanically Altered Diets		28.7
Psych. Hosp. -MR/DD Facilities	0.0	With Pressure Sores	5.7	Other Resident Characteristics		
Rehabilitation Hospitals	0.0	With Rashes	12.6	Have Advance Directives		100.0
Other Locations	8.8			Medications		
Deaths	36.0			Receiving Psychoactive Drugs		51.7
Total Number of Discharges (Including Deaths)	114			*****		

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87.5	87.5	1.00	84.5	1.04
Current Residents from In-County	85.1	83.6	1.02	77.5	1.10
Admissions from In-County, Still Residing	26.7	14.5	1.84	21.5	1.24
Admissions/Average Daily Census	115.4	194.5	0.59	124.3	0.93
Discharges/Average Daily Census	125.3	199.6	0.63	126.1	0.99
Discharges To Private Residence/Average Daily Census	28.6	102.6	0.28	49.9	0.57
Residents Receiving Skilled Care	92.0	91.2	1.01	83.3	1.10
Residents Aged 65 and Older	95.4	91.8	1.04	87.7	1.09
Title 19 (Medicaid) Funded Residents	75.9	66.7	1.14	69.0	1.10
Private Pay Funded Residents	20.7	23.3	0.89	22.6	0.92
Developmentally Disabled Residents	2.3	1.4	1.68	7.6	0.30
Mentally Ill Residents	39.1	30.6	1.28	33.3	1.17
General Medical Service Residents	4.6	19.2	0.24	18.4	0.25
Impaired ADL (Mean) *	43.9	51.6	0.85	49.4	0.89
Psychological Problems	51.7	52.8	0.98	50.1	1.03
Nursing Care Required (Mean) *	7.2	7.8	0.92	7.2	1.00